									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10696277						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20					RATE	T	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE ;	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		. 0			X\$ 9=			OR	X\$18=	1	
INDEPENDENT CLAIMS			3 minus 3 =		. 6			X43=			OR	X86=		
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT.					+145=			OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				ı	TOTAL			OR	TOTAL	770	
CLAIMS AS AMENDED - PART II												OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							SMAL	LEN	TITY	OR	SMALL	ENTITY	
AMENDMENT A	2/9/05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT. EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 18	Minus	~ 2	0	=		X\$ 9=			OR	X\$18=		
	Independent	· <u>3</u>	Minus	*** 3		3/		X43=			OR	X86=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ı	+145=				+290=		
								TOT/			OR	TOTAL		
									E L		OR	ADDIT. FEE		
		(Column 1) CLAIMS		(Colun		(Column 3)	Г		Τ.		1		455	
AMENDMENT B		REMAINING AFTER		NUMI PREVIO		PRESENT EXTRA		RATE		ADDI- IONAL		RATE	ADDI- TIONAL	
		AMENDMENT	<u> </u>	PAID		EXIA	ŀ			FEE			FEE	
	Total	*	Minus	**	-	=	1	X\$ 9=			OR	X\$18=		
	independent	* Minus ***			CI AINA	=		X43=			OR	X86=	-	
لـــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			OR	+290=		
											OR	TOTAL		
		(Calumn 2)	A	ODIT. FE	E L			ADDIT. FEE						
	·		(Colun		(Column 3)			1.	2001	1		4001		
I≶ I		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TI	ODI- ONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		= .		X\$ 9=			OR	X\$18=		
	Independent	•	Minus	***		=		X43=	T		OR	X86≖		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								十	 	<u>۳</u>			
• 14	the entry in solve	L	+145=	上		OR	+290=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***ADDIT. FEE ***ADDIT. FEE										·	OR ,	TOTAL ADDIT. FEE		
7	he Highest Num	mber Previously Pail	For (Total or	Independe	ent) is the	highest number	four	nd in the a	rbbiot	priate box	in cot	umn 1.		